## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	IN	ITIALS	ID NO.	D.	DATE	
		-	11110	10	0/	
FEE DETERMINATION	1/		61/1/	1/1	1100	
O.I.P.E. CLASSIFIER	V			0 0 100	Ju	1
FORMALITY REVIEW			11672	219	1/25/01	
RESPONSE FORMALITY	REVIEW	7	11022	11/251		
				//		1
	INF	EX OF CLA	MS			
	Rejecte			Non-electe		
>	Allowe	d h		Interferen		
_ (Through	numeral) Cancel	i he				
	Restric					
Claim Date	Claim	Date		Claim	Date	
Final Co. 10 10 10 10 10 10 10 10 10 10 10 10 10	1 1			120		TIT
B 5 70 2 1	Final			Final		
E OF STORE	51		++++	101	+++	++-
- Y15 - 11 - 1 - 1	52			101	+++	
	53			103	+++	
	54	+++		104	+++	
16/1/4	55			105	+	+++
	56	++++		106	++++	+
2 6 3 7	57	<del>                                      </del>		107	+++	+++
y 8	58			108	+++	+++
5 0	59			109	++++	+++
610	60			110	++++	+++
2011	61		++++	111	++++	+++
8 12 10	62			112		$\Box$
G 13	63			113		
10 14	64			114		
1) 15	65			115		13/10/
2 16	66			116		2 3 8
13 17	67			117	1 2 2	
ly 18	68			118		
15 19	69			119	1 9 3	14 1
16 20	70			120		ITT
21	71			121		
22	72			122		
23	73			123		$\Box$
24	74			124		
25	75			125		
26	76			126	+++	HL
27	77	++++		127	+	
28	78		1 ( )	128		1 1 1 1

If more than 150 claims or 10 actions staple additional sheet here

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